

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS4932CTC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 03/16/2011
NAME OF PROVIDER OR SUPPLIER WESTCARE COMMUNITY TRIAGE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 930 NORTH 4TH STREET LAS VEGAS, NV 89101		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. The survey was conducted using Nevada Administrative Code (NAC) 449, Community Triage Centers Regulations, adopted by the Nevada State Board of Health on July 14, 2006. This Statement of Deficiencies was generated as a result of the State Licensure survey conducted in your facility on 3/14/11. The facility is licensed for 50 Community Triage Center beds. The census at the time of the survey was 28. Ten employee files were reviewed, ten resident files were reviewed.	C 000		
C 295 SS=F	NAC 449.74343(3) P&P concerning employees NAC 449.74343 P&P concerning employees. 3. Each person employed in a facility must have a preemployment physical examination or certification of a 3-year health record from a physician, and be tested for tuberculosis as required in chapter 441A of NAC. This Regulation is not met as evidenced by: Based on record review on 3/14/11, the facility failed to ensure 9 of 10 employees complied with NAC 441A.375 regarding tuberculosis (TB) and 10 or 10 employees failed to have a pre-employment physicals (Employee #1, #2, #3, #4, #6, #8, #9 and #10 were missing a 2nd step	C 295		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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C 295	Continued From page 1 TB test and Employee #3 had no reading on the 2nd step of the TB test). This was a repeat deficiency from the 8/25/09 State Licensure survey. Severity: 2 Scope: 3	C 295			
C 765 SS=C	NAC 449.74359(5) Dietary services NAC 449.74359 Dietary services. 5. Menus must be in writing, planned in advance, dated and posted, and kept on file at the facility for at least 90 days. Any substitution must be noted on the written menu so that the menu on file reflects what was actually served. This Regulation is not met as evidenced by: Based on observation, record review and interview on 3/14/11, the facility failed to ensure the menu was posted, kept on file for 90 days, and substitutions were documented on the menu. Severity: 1 Scope: 3	C 765			
C 770 SS=D	NAC 449.74359(6) Dietary services NAC 449.74359 Dietary services. 6. A person who meets the requirements for registration with the Commission on Dietetic Registration as a dietitian or dietetic technician must be used as a consultant on planning meals and serving food. This person shall consult at least monthly with the staff of the facility.	C 770			

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C 770	Continued From page 2 This Regulation is not met as evidenced by: Based on record review and interview on 3/14/11, the facility failed to have a dietician or dietetic technician consult at least monthly on the planning and serving of meals (November 2010 and December 2010 consults were not available). Severity: 2 Scope: 1	C 770			
C 800 SS=F	NAC 449.74359(7)(f)(1) Dietary services NAC 449.74359 Dietary services. 7. The facility shall provide: (f) In each kitchen area: (1) Sinks for washing hands with blade-type faucets, soap and paper towels for drying hands; and This Regulation is not met as evidenced by: Based on observation on 3/14/11, the facility failed to have blade-type handles on the faucets in the kitchen. Severity: 2 Scope: 3	C 800			
C 810 SS=F	NAC 449.74359(8)(a) Dietary services NAC 449.74359 Dietary services. 8. A facility with more than 10 patients shall: (a) Comply with all applicable provisions of chapter 446 of NRS and the regulations adopted pursuant thereto; This Regulation is not met as evidenced by:	C 810			

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C 810	Continued From page 3 Based on observations, interview, and record review during the survey of 3/14/11, the facility failed to comply with the provisions of NAC 446. Food Safety Risk Factors: 1. The dishwasher was not dispensing sanitizer. Sanitation: 1. The interior of the ice machine was soiled. 2. The exterior of the dishwasher was heavily soiled. 3. The wall behind the ice machine and handwashing sink in the kitchen was soiled. Severity: 2 Scope: 3	C 810			
C 880 SS=F	NAC 449.74363(3) Design, construc, equipmnt and maintenance of NAC 449.74363 Design, construction, equipment and maintenance of facility. 3. Each facility shall comply with the provisions of NFPA 101: Life Safety Code, as adopted by reference pursuant to NAC 449.0105 This Regulation is not met as evidenced by: 2009 National Fire Protection Association (NFPA) 101 Life Safety Code Chapter 19 Existing Health Care Occupancies 19.7 Operating Features.	C 880			

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C 880	<p>Continued From page 4</p> <p>19.7.1 Evacuation and Relocation Plan and Fire Drills.</p> <p>7.1.10 Means of Egress Reliability.</p> <p>7.1.10.1 General. Means of egress shall be continuously maintained free of all obstructions or impediments to full instant use in the case of fire or other emergency.</p> <p>19.2.2.2.7 Any door in an exit passageway, stairway enclosure, horizontal exit, smoke barrier, or hazardous area enclosure shall be permitted to be held open only by an automatic release device that complies with 7.2.1.8.2.</p> <p>Based on observation on 3/14/11, the facility failed to comply with NFPA 101: Life Safety Code by blocking a designated exit door with a mattress (men's dormitory by the nurse's station) and by propping open a fire rated door with a rubber wedge (near the inner stairwell).</p> <p>Severity: 2 Scope: 3</p>	C 880			

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